

Date: \_\_\_\_\_

CIR Name: \_\_\_\_\_

Extension: x\_\_\_\_\_

Business Name: \_\_\_\_\_

CT Registration #: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ ext. \_\_\_\_\_

Please describe exactly what the taxpayer is doing and when they are receiving an error. If they get an error message please write exactly what the message states.